	VICE SUMMARY	Y	
PROVIDER INFORMATION Name of Provider:			
Brainfuse Online Instruction			
Mailing Address: 271 Madison Avenue			
City: State:		Zip Code:	
New York Phone Number: Fax Number:	E-Mail Address:	10016	
212-481-4870 212-481-4974		rainfuse.com	
PRIMARY CONTACT INFORMATION			
Name:	Phone Number:		
Alex Sztuden 212-481-4870  E-Mail Address			
asztuden@brainfuse.com			
SERVICES			
Areas to be served by provider:			
<ul><li>☑ All school districts in Missouri</li><li>☑ Specific districts or counties. Please list:</li></ul>			
Specific districts of countries. Flease list.			
Number of sessions per week: 2-4 sessions per week			
Cost per session: Individual - \$25-\$30 per session; Small Group - \$8-\$15 per session			
Proposed location of service delivery:			
Student's school site Provider site			
☐ Provider site			
If agrice delivery is not at the student's school is transportation provided? If so, is there a			
If service delivery is not at the student's school, is transportation provided? If so, is there a separate fee? (Note: Districts are not required to provide or pay for transportation).			
N/A			
	Certification of instructors:		
☐ Baccalaureate degree in education or			
Baccalaureate degree in related field of instruction. Please list related field(s):			
All tutors possess a four year college degree and are certified by Brainfuse.			
Additional education and/or experience:			
☐ Masters level degrees or above in either reading or mathematics			
Missouri teacher certificated/licensed teachers			
☐ Experience teaching students with specific disabilities Experience teaching LEP students			
☐ Experience todaming EEF statement ☐ Ability to speak languages other than English. Please list:			
Tutoring subjects available:	Grade Levels		
☐ Reading ☐ Writing ☐ Math  Title of tutoring curriculum utilized:		3-5 🛛 6-8 🖾 9-12	
Time of Service:		ctional Delivery:	
Before School	Individual Tut	· ·	
☐ Weekends	☐ Small Group ☐ On-Line/Web		
Summer	Other:	24004	
Other:			
Specifics of reporting to parents & school (check all that apply):			
Method: ☐ letters	Frequency: □ weekly		
phone calls	☐ weekly ☐ bi-monthly		
conference with parents	☐ bi-filefillity ☐ monthly		
conference with parents & school other:	other: Trans	cripts of Reports available on	

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